



HAWAII STATE ETHICS COMMISSION
 1001 BISHOP STREET, ASB TOWER 970
 P.O. BOX 616, HONOLULU, HAWAII 96809
 TEL: 587-0460 FAX: 587-0470
 email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION**LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Yamamoto	George		536-2351
MAILING ADDRESS (Street)			FAX
888 Mililani St. #601			523-6859
(City)	(State)	(Zip Code)	
Honolulu, HI		96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Hawaii Government Employees Association			536-2351
MAILING ADDRESS (Street)			FAX
888 Mililani St. #601			523-6859
(City)	(State)	(Zip Code)	
Honolulu, HI		96813	

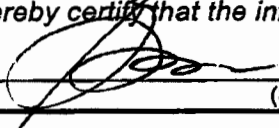
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Hawaii Government Employees Association			536-2351
MAILING ADDRESS (Street)			FAX
888 Mililani St. #601			523-6859
(City)	(State)	(Zip Code)	
Honolulu, HI		96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Tracy Chang			536-2351
MAILING ADDRESS (Street)			FAX
888 Mililani St. #601			523-6859
(City)	(State)	(Zip Code)	
Honolulu, HI		96813	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (Indicate below)
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

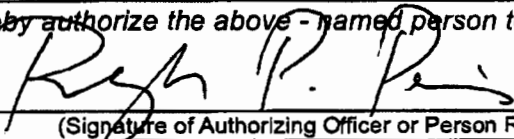
PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.


(Signature of Lobbyist)

1-31-05
(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Randolph P. Perreira		Executive Deputy Director	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Hawaii Government Employees Association		536-2351	
MAILING ADDRESS (Street)		FAX	
888 Mililani St. #601		523-6859	
(City)	(State)	(Zip Code)	
Honolulu, HI		96813	
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.			
 (Signature of Authorizing Officer or Person Represented)		1-31-05 (Date)	